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CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8****RECEIVED  
CENTRAL FAX CENTER****APR 14 2004****TO: Examiner - Jacqueline F. Stephens - United States Patent and Trademark**  
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*Marcia A. Mueller* (Signature)

**FROM: Marcia A. Mueller** (Typed or printed name of person signing Certificate)

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Listed below are the item(s) being submitted with this Certificate of Transmission:\*\*

Number of Pages Including this Page: 14

- 1) Transmittal Amendment + copy (2 pages)
- 2) Response Amendment (11 pages)
- 3)
- 4)
- 5)

Inventor(s): Gary Dean LaVon et al.

S.N.: 09/911,108

Filed: July 23, 2001

Case: 6567CR

Comments:

\*\*Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

IN THE UNITED STATES PATENT & TRADEMARK OFFICE  
RESPONSE/AMENDMENT

Mail Stop Non Fee Amendment  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an AMENDMENT for the patent application:

Application No. : 09/911,108  
Applicant(s) : Gary Dean LaVon et al.  
Filed : 23 July 2001  
Title : Absorbent Articles Comprising A Material  
Having A High Vertical Wicking Capacity  
TC/A.U. : 3761  
Examiner : Jacqueline F. Stephens  
Conf. No. : 4986  
Docket No. : 6567CR  
Customer No. : 27752

1. ☒ No additional fees (claims fees or extension fees) are known to be required.  
2. ☐ The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA*	RATE	FEE
TOTAL	* 20	MINUS	** 20	= 0.00	x \$18 =	\$0.00
INDEP.	* 1	MINUS	*** 3	= 0.00	x \$86 =	\$0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$290 =	\$0.00
					TOTAL	\$0.00

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
\*\* If the highest number of total claims previously paid for is less than 20, write "20" in this space.  
\*\*\* If the highest number of independent claims previously paid for is less than 3, write "3" in this space.  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

3. The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is attached.
- ☒ Any patent application processing fees under 37 CFR §1.16.
  - ☒ Any patent application processing fees under 37 CFR §1.17.

The Director is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

*Michael P. Hayden*  
Michael P. Hayden  
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Tel. No. (513) 626-5800

Date: April 14, 2004  
Customer No. 27752  
(6567CR.Transamd.doc)